PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number $A \subset 207/2000$

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			i #		(Column 2)					OR I I		
FOR			1-7)		NUMBER EXTRA		\vdash	SIC FEE	FEE 355.00		RATE BASIC FEE	710.00
					NUMB	ER EXTRA			333.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS minus 20=				us 20=	*		X\$ 9=		OR	X\$18=	/	
INDEPENDENT CLAIMS 3 =					\$		X40=		OR	X80=	_	
MULTIPLE DEPENDENT CLAIM PRESENT					· . · ·			-135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	T	OTAL		OR	TOTAL	7/0
CLAIMS AS AMENDED - PAI					T II						OTHER	THAN
(Column 1)			(Colum				S	MALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	_	=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		\vdash	405			070	
							L	135=		OR	+270=	
								TOTAL DIT. FEE		OR	TOTAL. ADDIT. FEE	
_	_	(Column 1)	1	(Colur		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 50	Minus	* 2		= 3)	(\$ 9=		OR	X\$18= \	740
	Independent	. 5	Minus	***		=		X40=		OR	X90=	168
	FIRST PRESE	NTATION OF MI	JUIPLE DEF	ENDEN	CLAIM		+	135=		OR	+270=	
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE	104
	(Column 1) (Column 2) (Column 3)										ADDIT: TEE	(
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	ŀ
	Independent	*	Minus	***		=		<40=			X80=	
_	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	Γ CLAIM		<u> </u>			OR	700=	
+135=										OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												